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**HB 551 Maryland Medical Assistance Program and Health Insurance –  
Coverage and Reimbursement of Telehealth Services  
Favorable  
House Health and Government Operations Committee  
February 10, 2021**

Good afternoon Chairwoman Pendergrass and members of the House Health and Government Operations Committee. My name is Tammy Bresnahan. I am the Director of Advocacy for AARP Md. I am here today representing AARP MD and its more than 870,000 members in support of HB 551, which would broaden the permissible uses and methods of telehealth in Maryland's Medicaid program while also providing safeguards that it is used only in ways that are clinically appropriate and desired by the patient. We thank Delegate Bagnall for bringing this important bill forward.

As you may know, AARP is the largest nonprofit, nonpartisan organization representing the interests of Americans age 50 and older and their families. Key priorities of our organization include ensuring all Marylanders can achieve financial and health security by having timely access to needed health services, including via audio when necessary. This is particularly important since, as a new Abell Foundation report shows, 520,000 Maryland households do not have a home wireline broadband subscription, with the percentages particularly high in African American and rural households.

The ongoing covid-19 pandemic has only made visiting the doctor and or an individual's health provider more serious and immediate. Even before the pandemic and just in the overall population, in 2017 22% of Maryland residents stopped taking medication as prescribed due to rising costs. Among Medicaid recipients, the percentage was surely higher. That means they need more easy access to prompt and effective health care.

HB 551 would help furnish this in several important ways. First, it would ensure that insurers in the Maryland Medicaid program continue to provide coverage for telehealth services even after the pandemic. It would also establish a requirement that telehealth services coverage include mental health and substance abuse, two areas that are very conducive to telehealth but where coverage has been an issue. Equally important, it would change existing law to define telehealth as including audio-only services, recognizing that many Marylanders, and especially many seniors, do not have access the broadband needed for video services.

AARP  
Real Possibilities

The bill also would allow health care services to be considered as appropriately delivered regardless of the location of the program recipient at the time of services, which is important for many Marylanders who cannot now receive them either at health care provider offices or at home.

While expanding the allowable uses of telehealth in Maryland, the legislation also incorporates several key protections for the patients, which is an important issue for AARP. Providers, for instance, may use telehealth services only when they are, as the bill says, “clinically appropriate,” available, accessible, and, very importantly, when the insured patient elects them. The covered entities under the legislation cannot compel an insured patient to use telehealth. Moreover, services such as e-mail or fax that don’t constitute real telehealth are excluded from the bill’s provisions, and insurers can’t impose a lifetime dollar maximum benefit for the telehealth services.

We believe this bill will be a major and needed help for Maryland Medicaid beneficiaries, including those age 50 and over that AARP represents. For these reasons **AARP Maryland respectfully requests a favorable report for HB 551.**

For questions or additional information, please feel free to contact Tammy Bresnahan, Director of Advocacy at [tbresnahan@aarp.org](mailto:tbresnahan@aarp.org) or by calling 410-302-8451.